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ABSTRACT

This edition of the newsletter of the National Information Center for Handicapped Children and Youth introduces methods used to change children's behavior and help them acquire the skills needed to work with others, have friendships, achieve independence, and enjoy normal social relationships. Brief articles have the following titles: "Social Skills"; "Identifying Obstacles to Social Interaction"; "Basic Principles for Changing Children's Behavior"; "Methods of Influencing Behavior Change"; "Developing Effective Communication"; "Changing the Child's Peers and the Environment." Thirty-eight references are cited. (DB)

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News Digest

Information from the National Information Center for Handicapped Children and Youth

NUMBER 6

SOCIAL SKILLS

Ten years after passage of Public Law 94-142 an unprecedented number of students with disabilities are nearing the age for leaving school. Special education for these young people should lead to higher education, competitive work or supported employment. However, reports indicate that between 50 and 80 percent are unemployed or underemployed, although 75-85 percent of persons with handicaps have the potential for competitive employment. The lack of appropriate social skills is one of the most frequently cited causes of this trend. Social and personal skills are critical tools for students with disabilities in making the transition from school to work. What will happen to children with disabilities when they grow up rests largely on their ability, with the help of their parents and community resources, to acquire the appropriate social skills which enable them to live their lives as independent, satisfied and productive adults.

As children grow up they learn who they are through contact with others. Their experiences begin with their own parents and then gradually expand outward to include those outside the home and family. Some children encourage positive responses from the time they are infants. Others have more difficulty in their relationships with the world. Because of an illness, a disability, or some unknown reason, they may not respond in the way expected of them. These children require special attention and encouragement in developing positive social relationships and appropriate behavior.

It should be recognized that difficulties in developing social skills are not necessarily connected to a particular level of intelligence or a certain type of family environment. A child with above average intelligence can experience severe social/emotional problems in developing social skills. In the same way, a child with no disability from a warm and supportive environment may have difficulty developing social skills while a child whose environment is unsupportive may be socially well adjusted. Children who require special attention need parents who are patient with slow or inappropriate responses, persistent in finding out what works with this particular child, and flexible in making changes needed by the child. The patience, knowledge, and skills required to help a child or young person learn to interact appropriately with others at times seems beyond any one person's ability. Indeed, getting help from an outside source may be necessary in some cases.

The National Information Center for Handicapped Children and Youth (NICHCY) regularly receives requests for information about how to teach children appropriate social skills and how to eliminate inappropriate behaviors. The frustration and despair sometimes expressed in these inquiries reflect the seriousness of the problem. It is not possible for this edition of *News Digest* to provide all the guidance and instruction parents and educators need on this complex subject. However, we hope to introduce our readers to methods that have been used to change children's behavior and help them acquire the skills they need to work with others, have friendships, achieve independence, and enjoy normal social relationships.

Identifying Obstacles to Social Interaction

The first step in helping children develop appropriate social skills is to identify the behaviors that they need to develop in order to have relationships with other children.

Because of learning difficulties some children are not able to see for themselves what behaviors are required to be accepted by others. Several studies (Brown, 1985; Donahue, 1983; Kronick, 1981; Minskoff, 1980) discuss how the learning problems of children can interfere with interactions with other children. For example, children who have visual perception problems may not be able to distinguish different facial expressions and may miss important social cues; children with auditory perception problems may mishear information and respond inappropriately; children with attention span or memory problems may have trouble knowing which information in a social situation is important and which to ignore.

Researchers have found that children with learning disabilities have a particularly difficult time carrying on conversations. These children often don't seem to understand rules of

conversation such as how to take turns, repair misunderstandings, introduce new topics, or how to select topics of mutual interest (Donahue, 1983; Kronick, 1981). They also have more trouble taking the perspective of others (Dickstein & Warren, 1980). Children with other disabilities such as mental retardation or autism may also have difficulties in distinguishing social cues and responding appropriately.

The most helpful efforts begin with observation of the child (Oden, 1980; Silverman, Zigmond, & Sansone, 1981). Then social skills training can be based on real-life situations and will be relevant to the child's immediate situation. Gaylord-Ross and Pitts-Conway (1984) describe the Frisco Interaction Scale for the Handicapped, which can be used as a guide for observing interactions and determining the type of help a child needs.

Videotapes and tape recorders can be useful aids to such observations. One innovative approach used by Gaylord-Ross, Stremel-Campbell, and Storey (1986) was to have preadolescents carry microcassette tape recorders in their shirt pockets as they worked with nondisabled young people. The recorded conversations were then used to train the students to make appropriate conversation while they worked. The same method can be used for other age groups by taping classroom activities, lunch room conversations or other social interactions.

Of course not all social skills are linked to specific situations. The observation should be based on knowledge about positive social behavior. Researchers have paid close attention to two aspects of social skills: (1) rules of conversation (beginning, maintaining, and ending conversations) and (2) responding to social cues (understanding social cues, both verbal and nonverbal, having a range of responses available for different situations, and being able to change as a result of people's reactions).

Other specific social skills include making eye contact, smiling, saying hello and goodbye, being polite, cooperating by taking turns and responding appropriately to questions, being sensitive to the feelings of others, supporting others by giving them attention or helping them, having interesting things to say, reinforcing and acknowledging others' comments, and controlling aggression and other inappropriate behavior.

Basic Principles for Changing Children's Behavior

A parent or educator who is trying to improve a child's social skills should keep in mind certain basic principles that can be used in any attempt to change a child's behavior. These principles include:

(1) Encourage children to take responsibility for their behavior. We do not control others. We can only influence others to want to change their behavior.

(2) Establish an atmosphere of mutual respect between you and the child. Children respond more positively when adults are consistent, honest, open, and supportive. (See below *Developing Effective Communication.*)

(3) Determine the behavior or events that take place before and after unwanted or undesirable behaviors. It is important to identify the things in the environment which set off or positively reinforce the child's inappropriate behavior. Sometimes a child is positively reinforced by a sense of control or the attention gained by the reaction to his or her misbehavior. It may be a useful tool for the adults to change their behavior or change schedules or events to avoid setting off or reinforcing inappropriate behavior.

(4) Explain expected behaviors and consequences to the child. Parents and teachers should be clear about the kind of behavior they expect, and the consequences that will follow if the behavior doesn't meet expectations.

(5) Establish consequences that are natural and/or logical and apply the consequences objectively (without anger). If the consequence for the child hitting a peer is to sit and think for 15 minutes, to also yell in anger or to spank the child will destroy the effect of the learning process. (Having the child sit and think for a few minutes or ignoring unwanted behavior are mild but effective forms of logical consequences.)

(6) Give positive reinforcement for appropriate behavior. It is important to make positive reinforcement a natural social reward; however, with behaviors for which it is very difficult to effect change, food may be the strongest reinforcer. The next level of reinforcers is a tangible reward such as a toy, token or other desired object. Nontangible social rewards include a compliment, a hug, time with peers, TV time, etc.

(7) Apply consequences or positive reinforcement, as appropriate, immediately following the target behaviors. The child must be able to clearly relate the consequence or reinforcement to the target behavior, if learning is to be the most effective.

(8) Select only one or two behaviors to teach or modify at one time. Don't try to solve several behavior problems at once. The child will only become confused and may not learn any of the behaviors well.

(9) Be consistent. It is important for parents and teachers to be consistent in implementing a child's program. It is also important for parents and teachers to cooperate in developing the program. Frequent communication between parents and teachers will ensure that the same behavior is being expected and that the behavior results in similar consequences at school and at home.

Along with the basic things all parents need to do to help their children develop good behavior, parents of children with disabilities can also take the following steps (Moon and Beale, 1985):

(1) Encourage their child to learn independent living skills. It takes time to teach children with disabilities skills that other children learn without instruction. Sometimes it is easier just to do the task (e.g., dressing, feeding, grooming, household chores) for the child than to be patient while he or she is learning to do it. It is important, though, both for children's self-confidence and for their relationships with others, that they learn to be as independent as possible.

(2) Ensure that from an early age their child has the same opportunity to meet people that he or she would if there was no disability. The more social experiences a child has, the more practice he/she has in using social skills. The more social contact a child has, the more opportunity there is to develop the skills necessary to interact appropriately with others.

(3) Be aware of how the child's peers are dressing and what their favorite activities and topics of conversation are. Families can then help in choosing popular clothing and learning skills needed for the child or youth to join peers in activities and conversation.

(4) Use the techniques of reinforcement, role modeling, coaching, and practice to teach the child such social skills as making eye contact, smiling, and cooperating in playing games, participating in sports, conversing or accomplishing a task.

(5) Discuss their concerns about the importance of social skills with school personnel. Parents could even provide them with information about some of the materials and programs which seem potentially effective and beneficial for the child.

Methods of Influencing Behavior Change

In addition to the above principles and ideas used to influence behavior change, psychologists and educators have identified methods that can be used to help children change their behaviors. Three examples of such methods are: the *Behavioral Method*, the *Modeling Method*, and the *Instruction and Practice Method*.

The *Behavioral Method* teaches by having children learn through positive reinforcement and negative consequences of their behavior. The *Modeling Method* stresses the role of observing and imitating others in improving social skills. The *Instruction and Practice Method* involves teaching the reasons why positive behavior is important, the rules regarding social behavior and giving students opportunities to practice appropriate behavior.

The following sections describe how these methods have been put to work to develop the social skills of children.

The Behavioral Method

Extensive knowledge exists about the behavioral techniques of using positive reinforcement and negative consequences to increase desired behavior and decrease unwanted behavior. This knowledge has been applied by researchers to improve the social skills of children with a wide range of disabilities. Researchers have found that systematic reinforcement through praise of children who are being outgoing and behaving appropriately tends to increase the desired behavior. Equally, ignoring or mildly scolding children as a logical consequence for misbehavior tends to decrease unwanted behaviors.

For children who do not respond to praise, other rewards are used. For some children a system of tokens is effective. When they engage in agreed upon behavior such as saying hello to another child or sharing materials, they receive a token which they can later exchange for something desirable. Undesirable behaviors such as refusing to share result in a consequence of having tokens that have been earned taken away.

Studies have shown that for students with severe problems a favorite food is an effective basic reinforcer for desired behavior. Sometimes this is the only strategy that will work initially. This approach should be used only when other tactics will not work.

Whatever the reinforcement, it should be accompanied by words of encouragement. That way encouragement will become important to the child and other reinforcement can gradually be phased out.

Although the principles of the behavioral method are easy to understand, they may not be easy to apply. In a family situation this approach can be very difficult to implement successfully due to the necessity for consistency and appropriate timing, but it can also be very rewarding. Researchers use carefully worked out schedules of rewards, where timing and consistency are important to success. Berler, Gross, and Drabman (1982) and Cartledge and Milburn (1978) state that teachers typically do not use these methods successfully without training. Pryor (1984) has written a practical discussion of how to use behavioral techniques in everyday life. Weiner (1981) describes several behavioral approaches to increasing the social skills of learning disabled youth. Gaylord-Ross and Pitts-Conway (1984) have used these techniques successfully in working with autistic and severely retarded youth.

The behavioral approach is based on sound research and has proven to be effective; however, concern has been expressed by the Association for Persons with Severe Handicaps and other groups. They caution against the misuse of the approach, or the use of extreme behavioral means to modify the behavior of persons with severe disabilities. In a resolution passed in October, 1981, the Association supported elimination of behavior modification techniques that 1) cause physical pain; 2) actually cause or carry the potential for physical harm or death; 3) dehumanize individuals by treating them in a way that persons without handicaps would not be treated; 4) raise doubts in the minds of family, staff, and/or caregivers about the appropriateness of such techniques or their involvement in carrying them out; 5) lead to obvious repulsion or stress by non-disabled peers who cannot reconcile the behavior modification practices being used with acceptable standard practices. Readers who wish to get an overview of alternatives in modifying behavior of persons with severe disabilities should consult Meyer and Evans (1986).

The Modeling Method

Researchers have shown that social skills learning is partly based on observation and imitation of persons who are meaningful to us—family, friends, teachers, television heroes, people we admire for whatever reason. Children have also been shown to be influenced by watching videotapes of other children playing. If given the opportunity immediately after watching a scene, they are likely to imitate the behavior they have watched (Bandura, 1977). Some social skills training programs use either

live or filmed models to teach desired behavior. Whether or not modeling is effective depends on several considerations (Gresham, 1981). First, of course, the child needs to be interested enough to pay attention to the model and must be able to tell which of the model's behaviors are important. Some studies have shown that first-person narration increases children's attention to the important aspects of the model's behavior. For example, the model says, "I am talking and playing with others." Another way to increase attention to the desired behavior is to show the model being praised or otherwise reinforced for performing the behavior.

Second, the child needs to be able to identify with the model (see the model as being like him or herself in some important way) and also to admire the model enough to want to imitate his or her behavior. Third, the child needs to be able to remember the model's behavior and to be capable of imitating it.

O'Connor (1969) developed a 26-minute film that has been used successfully in increasing the contacts of withdrawn preschool children. The film shows several different children becoming increasingly involved with other children. Part of the success of this film may be the gradual increase in interaction so that children can picture themselves in the same situation. A peer modeling program designed by Lancioni (1982), which was successful in increasing social contact of children with mental retardation with nondisabled children is described later under *Combining Techniques*.

The Instruction and Practice Method

Instruction involves teaching the reasons why positive behavior is important, the rules regarding social behavior, and giving students opportunities to practice appropriate behavior. Oden and Asher (1977) helped socially isolated elementary school children improve their peer relationships with other children by arranging for each child to play games such as "Blockhead" and "Funny Bones" over a period of time with six different peers. Just before each game-playing session an adult "coach" talked with the child about what makes a game fun to play with another person. For example, the coach proposed that cooperation was important and asked the child to provide examples of both cooperating and not cooperating. Then the child and the coach discussed whether or not each of the examples would make the game fun to play for both children. The child was encouraged to try out the ideas while playing the game and afterwards the coach talked with him or her about how well the ideas had worked. Oden (1980) discusses how to adapt the method of coaching to meet the individual needs of children.

Several studies discuss techniques for instructing students in various aspects of social skills. Silverman, Zigmond, and Sansone (1981) and Weiner (1980) describe similar techniques for teaching students to be aware of how others react to their behaviors and to realize that different behaviors produce different results. In both programs, the teacher creates a true-to-life story without an ending. A small group of students propose different possible endings and discuss the likely results of each. Later the students act out the story using the different endings so that they experience the effects of changing their behavior. Sometimes the scenes are videotaped to facilitate discussion.

Weiner suggests that the students then use this new knowledge to identify and change their own behaviors that lead to negative results. Each student starts with one behavior that he or she wants to change and begins practicing the new behavior in a contrived situation where a lot of support is available. Next the new behavior is tried out in one real-life situation. Group discussion and support continue as the students gradually expand the environments in which they use their new behaviors.

Minskoff (1980) has structured an approach to teaching nonverbal communication skills to learning disabled youth which can be adapted for either elementary or high school students. It has been found that some students with learning disabilities have difficulty perceiving nonverbal cues, so the program first provides a series of tasks to help them understand the differences between cues. For example, they learn to tell the difference between such facial expressions as surprise, fear, anger, sadness, happiness, interest, and confusion. Then through the use of stories, films, and role playing they learn how to understand and use such cues in social situations. This approach can be readily adapted for use with different populations at home or in school.

Wehman and Schleien (1980), Gaylord-Ross, Stremel-Campbell, and Storey (1986) describe how to use task analysis procedures to teach persons with severe disabilities to participate successfully in such social activities as playing games or having a cup of coffee in a restaurant.

Combining Techniques

The programs described in the preceding sections use the technique described in that section as well as one or more of the other techniques. Such a combination of techniques has been found to be more effective than using only one by itself (Gresham, 1981).

Lancioni (1982) designed a program to teach social skills to three elementary school children with mental retardation who were placed in regular classrooms but did not interact with the classmates. The program used other children as tutors. After being trained, three children worked as tutors with one mentally retarded child, modeling and rewarding the desired behavior. The article describing the program is intended for researchers and is very technical, but it does show that a carefully thought out program using modeling, instruction, and reinforcement can improve the social contacts of severely withdrawn children who are mentally retarded.

Developing Effective Communication

The success of any effort to improve a child's social skills depends on the quality of the communication between the parent and the child. Over the years a number of books have been written to help parents become more effective in communicating

with their children. Works by Dreikurs (1972), Gordon (1975), and Dinkmeyer (1983), are examples of books from which parents may benefit. Though these works vary in content, there are certain themes that they have in common. The ultimate goal is to have the children accept responsibility for their own actions. Each author stresses the need for parents to communicate in an emotionally honest and positive way with their children. Gordon talks about "active listening" as a way of encouraging the child to communicate with the parents. Dinkmeyer applies the ideas on effective communications between parents and children stressing the need for children to accept responsibility for their own actions and for parents to use natural consequences in teaching their children. In addition to the works already mentioned, parents may wish to consult James, *Born to Win* (1978), Freed, *T. A. for Tots* (1977) and *T. A. for Kids* (1971), Glasser, *Reality Therapy* (1975), and Ginott, *Between Parent and Child* (1969) and *Between Parent and Teenager* (1975), for ideas and help in understanding behavior and improving communication.

Changing the Child's Peers and the Environment

So far, this paper has discussed the means for changing the behavior of children with disabilities. But there is another dimension to improving social relationships. Techniques can be used in school and play settings to encourage nondisabled children to develop relationships with children who are disabled.

Experience shows that nondisabled children from preschool age to adolescence react positively to and develop friendships with children with disabilities when given support and encouragement by adults.

Teachers who have children with disabilities and nondisabled children in their classes can take a number of steps to encourage positive social interactions:

(1) Model positive behavior by demonstrating that they like and value children with a disability and including them in classroom activities.

(2) Increase the nondisabled children's knowledge of what it is like to be disabled. Teachers can offer special lessons on disabilities, conduct group exercises or sensitization sessions, invite adults with disabilities to speak to the class, show films about disabilities and use such attitude change curricula as that developed by Barnes, Berrigan, and Biklen (1978).

(3) Use the behavioral techniques of reinforcement by praising and encouraging or otherwise reinforcing children when they are outgoing and behave appropriately. Odom and Strain (1984) caution, however, that teachers should be sensitive to the timing of their reinforcement so that they do not interrupt conversations, play or other interactions. It would also be important to avoid drawing attention to children with handicaps when they are exhibiting appropriate behavior by encouraging or reinforcing behaviors in an obvious manner.

(4) Use materials and activities that encourage children to socialize with each other as part of learning activities. Odom and Strain (1984) discuss existing knowledge about materials and activities that encourage preschool children to work and play together. They found, for example, that structured play offered more opportunities for interaction. During table time, more social contact occurred when the children glued or did puzzles than when they drew pictures or played with playdough. Another technique that has been used in increasing opportunities to socialize is to limit the amount of material used in a certain task so that children have to take turns and share. Certo and Kohl (1984) suggest that through a process of self-observation and analysis teachers can identify practices that discourage opportunities for social experiences.

Just as changing the environment in which children play has been found to encourage social contact for preschool children, methods of teaching that stress cooperation among students have been found to work with older children. The Team-Assisted Individualization and Teams-Games-Tournaments (described by Madden & Slavin, 1983, and Slavin, 1983,1984) are two cooperative learning models.

When children with disabilities are taught primarily in special classes, additional efforts are needed to encourage contact with nondisabled children. The classrooms where children with disabilities are taught need to be located near regular classrooms and their schedules should be arranged so that they eat lunch, use the playground, take academic classes whenever possible, take nonacademic classes, and share hallway lockers with their nondisabled peers (Taylor, Biklen, & Searl, 1985).

Gaylord-Ross and Pitts-Conway (1984) describe the important role of the special education teacher in promoting social integration. The teacher's own positive personal relationships with the regular staff and ability to provide the regular teachers with information, support and reinforcement for their commitment to integration is extremely important to the success of a program. They also describe a variety of programs designed to promote friendships. In one formally structured program, nondisabled young people take a work experience course where they are taught to analyze tasks and use behavioral reinforcement techniques to tutor students with severe disabilities in activities such as money management, meal preparation, leisure, and communication skills. These formal programs have been found to lead to more informal contact and friendships among the students. There are other programs that are unstructured from the start. For example, in a special friends program, a coordinator matches students according to their interests and arranges a time for them to meet, but provides no structure for their activities.

Gaylord-Ross and Pitts-Conway have also found that when nondisabled teenagers are given support from adults they are open and responsive to teenagers with severe disabilities. Odom and Strain (1984) have found the same for preschool children. They describe a program where nondisabled children are taught to engage children with disabilities in five-minute play sessions.

The sessions have been found to increase social contact among the children during the rest of the school day. Taylor and his colleagues (1985) also report that in schools across the nation where a commitment has been made to integration, nondisabled children accept and interact positively with their schoolmates who are disabled.

In conclusion, disabled and nondisabled children may need help from adults at home and in school in learning how to interact positively. The disabled child may need specific training in social skills and the nondisabled child may need encouragement and support in his or her dealings with children with disabilities. Studies show good results of such efforts, with disabled children developing positive relationships that last over time.

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Copies of most of these documents can be obtained through your local library. We have included the publisher's address in the event that the publication is not available in your area.

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Additional Resources

In addition to the books and articles listed above, the National Information Center has available a list of social skills programs that may be useful to parents, teachers and others working with children with disabilities. Readers wishing to obtain a copy of this list should write: NICHCY, Box 1492, Washington, DC 20013.

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